S-1383.1			

SENATE BILL 5919

State of Washington 59th Legislature 2005 Regular Session

By Senators Thibaudeau, Fairley and Kohl-Welles

Read first time 02/14/2005. Referred to Committee on Health & Long-Term Care.

- AN ACT Relating to mental health service providers under medicaid;
- 2 and amending RCW 74.09.520.

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- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 **Sec. 1.** RCW 74.09.520 and 2004 c 141 s 2 are each amended to read 5 as follows:
 - (1) The term "medical assistance" may include the following care and services: (a) Inpatient hospital services; (b) outpatient hospital services; (c) other laboratory and x-ray services; (d) nursing facility services; (e) physicians' services, which shall include prescribed medication and instruction on birth control devices; (f) medical care, or any other type of remedial care as may be established by the secretary; (g) home health care services; (h) private duty nursing services; (i) dental services; (j) physical and occupational therapy and related services; (k) prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist, whichever the individual may select; (1) personal care services, as provided in this section; (m) hospice services; (n) other diagnostic, screening, preventive, and rehabilitative services; and (o) like services when furnished to a

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child by a school district in a manner consistent with the requirements of this chapter. For the purposes of this section, the department may not cut off any prescription medications, oxygen supplies, respiratory services, or other life-sustaining medical services or supplies.

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"Medical assistance," notwithstanding any other provision of law, shall not include routine foot care, or dental services delivered by any health care provider, that are not mandated by Title XIX of the social security act unless there is a specific appropriation for these services.

- (2) The department shall amend the state plan for medical assistance under Title XIX of the federal social security act to include personal care services, as defined in 42 C.F.R. 440.170(f), in the categorically needy program.
- (3) The department shall adopt, amend, or rescind such administrative rules as are necessary to ensure that Title XIX personal care services are provided to eligible persons in conformance with federal regulations.
- (a) These administrative rules shall include financial eligibility indexed according to the requirements of the social security act providing for medicaid eligibility.
- (b) The rules shall require clients be assessed as having a medical condition requiring assistance with personal care tasks. Plans of care for clients requiring health-related consultation for assessment and service planning may be reviewed by a nurse.
- (c) The department shall determine by rule which clients have a health-related assessment or service planning need requiring registered nurse consultation or review. This definition may include clients that meet indicators or protocols for review, consultation, or visit.
- (4) The department shall design and implement a means to assess the level of functional disability of persons eligible for personal care services under this section. The personal care services benefit shall be provided to the extent funding is available according to the assessed level of functional disability. Any reductions in services made necessary for funding reasons should be accomplished in a manner that assures that priority for maintaining services is given to persons with the greatest need as determined by the assessment of functional disability.

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1 (5) Effective July 1, 1989, the department shall offer hospice 2 services in accordance with available funds.

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- (6) For Title XIX personal care services administered by aging and disability services administration of the department, the department shall contract with area agencies on aging:
- (a) To provide case management services to individuals receiving Title XIX personal care services in their own home; and
- (b) To reassess and reauthorize Title XIX personal care services or other home and community services as defined in RCW 74.39A.009 in home or in other settings for individuals consistent with the intent of this section:
- (i) Who have been initially authorized by the department to receive Title XIX personal care services or other home and community services as defined in RCW 74.39A.009; and
- 15 (ii) Who, at the time of reassessment and reauthorization, are 16 receiving such services in their own home.
 - (7) In the event that an area agency on aging is unwilling to enter into or satisfactorily fulfill a contract or an individual consumer's need for case management services will be met through an alternative delivery system, the department is authorized to:
 - (a) Obtain the services through competitive bid; and
- 22 (b) Provide the services directly until a qualified contractor can 23 be found.
 - (8) Mental health providers licensed under chapters 18.57, 18.71, 18.79, 18.83, and 18.225 RCW are authorized to provide mental health services to individuals' families, or groups who are medicaid enrollees. These services may be offered in the providers' office, in the clients' home, or in a nursing facility.

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